

Behavior Therapists' Responses to Terrorism, Disaster, and Trauma

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The terrorist attacks of September 11, 2001, had a profound impact on the international community. While our nation works to pick up the pieces and to heal from the violent events of September 11, we believe that members of AABT have a responsibility as behavioral scientists and clinicians to aid in the country's recovery. Indeed, many AABT members were present at the front lines of the World Trade Center and the Pentagon, providing disaster response services to victims and their families. Trauma researchers offered their expertise regarding the potential impact on our children of repeated exposure to media accounts of the terrorist attacks (e.g., Gurwitch, Silovsky, Schultz, Kees, & Burlingame, 2001), while others offered cautions regarding the delivery of debriefing interventions and called for science-based practices in these efforts (e.g., Foa, Hembree, Riggs, Rauch, & Franklin, 2001). AABT's central office worked to immediately update the Web site, and relevant links were created to provide clinicians, researchers, and the public with accurate information about the effects of trauma and resources available to deal with these problems. Members of AABT also worked swiftly to assemble a number of special events and meetings related to the terrorist attacks in time for the November AABT Annual Convention in Philadelphia.

In the weeks and months that followed September 11, behavior therapists have also been faced with the task of addressing trauma-related issues in the context of their clinical practices. Many professionals who have not specialized in providing trauma therapy are now faced with the challenge of effectively providing such services, even when their practices are geographically distant from the sites of the events (Schuster et al., 2001). This special series of articles originated with discussions in the immediate days and weeks after September 11 between members of the AABT Public Education and Media Dissemination Committee, the Disaster and Trauma Special Interest Group, and the AABT leadership. We recognized the importance of addressing a number of issues related to being a behavior therapist in the context of the challenges our nation now faces. Because of the unique nature of the events of September 11, we felt that it was important to include personal accounts of AABT members' experiences as behavior therapists, more traditional reviews of the empirical literature, as well as some practical suggestions for behavior therapists to consider in caring for themselves.

We begin this special series with two articles by psychologists who served in disaster response teams at the front lines of the attacks in Washington, DC, and New York City. Robyn Walser provides a commentary of her experiences as a member of a disaster response team that traveled by motor vehicle on the morning of September 11 from the National Center for PTSD in Palo Alto, California, to Washington, DC. She describes her

experiences in working with the military and the families of victims of the Pentagon attack. Barry Lubetkin shares with us his personal experiences as an American Red Cross volunteer at ground zero of the World Trade Center (WTC), a consultant to one of the hijacked airlines, and a consultant to a WTC company suffering serious casualties among their employees. Joe Ruzek addresses important issues related to the design and dissemination of rapid, evidence-based mental health responses to large numbers of providers following mass violence or catastrophic disasters. Further, two articles more broadly address issues related to the potential effects of terrorism on behavior therapists. First, Sonja Batten and Sue Orsillo examine anecdotal observations of the impact of the September 11 attacks on therapists' in-session behaviors and review literatures that can offer guidance regarding the impact of a large-scale trauma on therapists' own functioning and ability to provide effective services to their clients. Finally, Kathleen Palm, Alethea Smith, and Victoria Follette review the literature on vicarious traumatization and offer some specific suggestions for self-care for therapists engaged in trauma therapy.

We wish to thank these individuals for sharing their experiences and expertise during a time of many competing demands and challenges. We also wish to extend our gratitude to the members of the AABT Disaster and Trauma Special Interest Group for graciously volunteering their time to carefully review these papers on a very tight time schedule. We hope that this series will highlight the personal aspects of what it means to be a behavior therapist in a time of crisis, while encouraging us all to become more effective clinicians and behavioral scientists.

References

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